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SURGERY FOR SQUINT IN ADULTS

Q *What is a squint?*

A The eyes normally both look in exactly the same direction. When they do not a squint is present. It is also known as strabismus.

Q *What is the cause of a squint?*

A Six small muscles around each eye keep the eyes straight. If one or more muscles stops working properly a squint develops. This is the commonest cause of a squint which first appears in adult life.

Q *What are the effects of a squint?*

A An adult who has had previously normal vision will experience double vision if a squint develops. By contrast, if a squint has been constantly present, and always visible, from childhood there is usually no double vision.

Q *What is the treatment for squint in adults?*

A Many squints that first appear in adult life improve over six to eight weeks without any treatment. If double vision persists it is often possible to improve it with a "prism" – a special lens added to spectacles. Occasionally surgery can help double vision. Usually however surgery is used only in longstanding adult squints to improve the cosmetic appearance of the eyes.

Q *How is squint surgery done?*

A A general anaesthetic is always used. During the operation the pull of the eye muscles is adjusted to straighten the eyes. Surgery may be on one or both eyes.

Q *How successful is squint surgery in adults?*

A Usually very successful in improving the cosmetic appearance. However, double vision cannot always be eliminated by squint surgery. If there are particular circumstances which make the surgery or the outcome less certain the surgeon will discuss these before you decide to have the surgery.

Q *Are there any complications to squint surgery in adults?*

A If double vision has appeared as a result of a squint that started in adult life, surgery may not correct it. Other complications are very uncommon. If the squint has not been fully corrected or if it returns at a later date a second operation may occasionally be needed.

Q *What is the risk of the squint coming back?*

A It is very uncommon for a squint to return. If there is a significant risk that it would return or be incompletely corrected, this would normally be discussed before the decision is made to have the surgery.

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